## P06000001240

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## **COVER LETTER**

Division of Corporations	
SUBJECT: Silver Lake Utilities, Inc.	
Name of Corporation	<del></del>
DOCUMENT NUMBER: P0600001240	
The enclosed Statement of Change of Register	red Office/Agent and fee are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Kristen Chittenden	
Name of Contact Person	
SIlver Lake Utilities, Inc.	
Firm/Company	
400 N. Ashley Street, Suite 2500	
Address	
Tampa, FL 33602	
City/State and Zip Code	<u></u>
kristen.chittenden@lykes.c	com
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter	r, please call:
Kristen Chittenden	at (813 ) 470-5070
Name of Contact Person	at (813 ) 470-5070  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	he Department of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation of	7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of $\frac{\Gamma}{2}$ registered agent, or both, in the State of F	lorida	<del></del>
	he corporation: Silver Lake Utilities	-		
2. The principal	office address: 400 N. Ashley Street,	Suite 2500, Tampa, FL 33602		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 6/16/47	Document number: P0600000	1240	
	I street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file witesigned)	th the	
	Kristen Chittenden		_	
	400 N. Tampa Street, Suite 1900		· . ! &	วก
	Tampa, FL 33602			را ان ميرا ان ميرا
6. The name and (if changed):	I street address of the new registere	d agent (if changed) and /or registered off	THE FARY OF LANGSEN	9*2
	Kristen Chittenden		יים אינו אור אור אינו אור אור אינו	<u> </u>
	400 N. Ashley Drive, Suite 2500		- FAX: 5	
	F	P.O. Box NOT acceptable	•	
	Tampa, FL 33602		=	
The street address changed will	ess of its registered office and the sbe identical.	street address of the business office of its	s registered a	igent,
Such change was authorized by the	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so	
Kaus	teletite )	Secretary		
<b>-</b>	re of an officer of director	Printed or typed name and tit	le	
I further agree of my duties, an document is bei	to comply with the provisions of a ad I am familiar with and accept th	ent and agree to act in this capacity. Il statutes relative to the proper and com ie obligation of my position as registered in the registered office address, I hereb ange.	plete perform dagent. Or ny confirm tha	nance if this at the
Kud	Catto	9/8/20		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Т	yped or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*